

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007791

FILED
Apr 30, 2007
Secretary of State

Entity Name: SUGARLOAF MEADOW HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

908 BRISTLE CONE STREET
MINNEOLA, FL 34715

New Principal Place of Business:

20103 SWEETWOOD LANE
CLERMONT, FL 34715

Current Mailing Address:

908 BRISTLE CONE STREET
MINNEOLA, FL 34715

New Mailing Address:

20103 SWEETWOOD LANE
CLERMONT, FL 34715

FEI Number: 20-0201812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, BRET
700 ALMOND STREET
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

KRAWCHUK, ADAM
20103 SWEETWOOD LANE
CLERMONT, FL 34715 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ADAM KRAWCHUK

04/30/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KRAWCHUK, ADAM
Address: 908 BRISTLE CONE STREET
City-St-Zip: MINNEOLA, FL 34715

Title: VPD () Delete
Name: ALI, ASGAR
Address: 20138 SWEETWOOD LN
City-St-Zip: CLERMONT, FL 34711

Title: S () Delete
Name: KRAWCHUK, KAREN
Address: 908 BRISTLE CONE STREET
City-St-Zip: MINNEOLA, FL 34715

Title: TD () Delete
Name: GREYER, LISA
Address: 20121 SWEETWOOD LANE
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KRAWCHUK, ADAM
Address: 20103 SWEETWOOD LANE
City-St-Zip: CLERMONT, FL 34715

Title: VPD (X) Change () Addition
Name: ALI, ASGAR
Address: 20138 SWEETWOOD LN
City-St-Zip: CLERMONT, FL 34715

Title: S (X) Change () Addition
Name: KRAWCHUK, KAREN
Address: 20103 SWEETWOOD LANE
City-St-Zip: CLERMONT, FL 34715

Title: TD (X) Change () Addition
Name: GREYER, LISA
Address: 20121 SWEETWOOD LANE
City-St-Zip: CLERMONT, FL 34715

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADAM KRAWCHUK

PD

04/30/2007

Electronic Signature of Signing Officer or Director

Date